

MONROE COUNTY



CONSTRUCTION TRADES APPLICATION

THIS APPLICATION COVERS BUILDING, ENGINEERING, PLUMBING, ELECTRICAL AND MECHANICAL FIELDS. ALSO COVERS MASTERS, JOURNEYMEN, APPRENTICE AND SPECIALTY CONTRACTORS FOR MONROE COUNTY CERTIFICATE OF COMPETENCY.

PASSPORT SIZE
COLORED
PHOTO

PLEASE TYPE OR PRINT IN DARK INK.

NAME _____ S.S.# _____

HOME/MAILING ADDRESS _____ CITY, STATE, ZIP _____

PLACE OF BIRTH _____ DATE OF BIRTH _____ PHONE _____

BUSINESS NAME _____ BUSINESS ADDRESS _____

CITY, STATE, ZIP _____ PHONE _____

DRIVER'S LICENSE NO. _____

I HEREBY MAKE APPLICATION TO QUALIFY UNDER THE PROVISIONS OF MONROE COUNTY CODE FOR THE

LICENSE(S) CATEGORY OF: _____

1. NUMBER OF YEARS WORKING IN THE TRADE APPLIED FOR: _____
2. NUMBER OF YEARS EXPERIENCE AS AN APPRENTICE: _____ AS A JOURNEYMAN: _____
3. HAVE YOU PREVIOUSLY FILED AN APPLICATION IN MONROE COUNTY FOR THIS LICENSE OR ANY OTHER CATEGORY: YES _____ NO _____ IF "YES" WHEN DID YOU APPLY _____

TRADE EXPERIENCE

LIST BELOW YOUR TRADE EXPERIENCE SPECIFICALLY RELATED TO THE CATEGORY FOR WHICH YOU ARE APPLYING. BE ACCURATE AND DETAILED AS EXPERIENCE IS A PREREQUISITE TO QUALIFICATION FOR EXAMINATION AND/OR CERTIFICATION AND THIS INFORMATION WILL BE CHECKED. LIST YOUR COMPLETE TRADE EXPERIENCE AND IF MORE SPACE IS NEEDED, USE BACK OF THIS PAGE.

DATE
FROM: MO. – YR. TO: MO. – YR. _____

1. COMPANY NAME STREET CITY & STATE ZIP PHONE
BRIEF JOB DESCRIPTION: _____

2. COMPANY NAME STREET CITY & STATE ZIP PHONE
BRIEF JOB DESCRIPTION: _____

3. COMPANY NAME STREET CITY & STATE ZIP PHONE
BRIEF JOB DESCRIPTION: _____

IMPORTANT – NOTICE

ALL TRADE EXPERIENCE MUST BE DOCUMENTED BY **NOTARIZED** LETTERS FROM ALL SUBJECT EMPLOYERS AND/OR OTHER DOCUMENTARY PROOF OF SUCH EXPERIENCE AS MAY BE REQUIRED, BEFORE YOUR APPLICATION CAN BE PROCESSED. IT IS THE APPLICANT'S RESPONSIBILITY TO CONTACT EMPLOYERS AND OBTAIN FROM THEM SUCH DOCUMENTARY PROOF THEREOF, TO BE ATTACHED HERETO BY THE APPLICANT UPON SUBMITTING THIS APPLICATION.

EDUCATION

LIST BELOW YOUR EDUCATIONAL RECORD. BE ACCURATE AND DETAILED AS THIS INFORMATION MAY BE PARTIALLY USED AS A PREREQUISITE TO QUALIFICATION FOR EXAMINATION AND/OR CERTIFICATION.

ELEMENTARY SCHOOL _____ CITY _____ STATE _____ YEARS _____

HIGH SCHOOL _____ CITY _____ STATE _____ YEARS _____

COLLEGE _____ CITY _____ STATE _____ YEARS _____

DEGREE TITLE _____ YEAR OBTAINED _____

TRADE SCHOOL _____ CITY _____ STATE _____ YEARS _____

TRADE SCHOOL COURSES TAKEN: _____

DO NOT REPRODUCE THIS APPLICATION